

<b>CLAIMS ONLY</b>						SERIAL NO. _____		FILING DATE _____	
						APPLICANT(S) _____			
<b>CLAIMS</b>									
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.
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TOTAL IND.	3	↓			↓			↓	
TOTAL DEP.	3	↔			↔			↔	
TOTAL CLAIMS	32								
* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS									
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